
SHC 39 . DRUG PRODUCTION AND GOLDENHAR SYNDROME: A CASE REPORT

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Goldenhar Syndrome is a congenital defect characterized by incomplete development of the ear, nose, soft palate, lip, and mandible. It is associated with anomalous development of the first branchial arch and second branchial arch. Cardiac, urogenital, skeletal and central nervous system can be affected. Although most of the patients are sporadic, cases with autosomal dominant and recessive is seen.

33 years old woman was admitted to our hospital for having a newborn with Goldenhar Syndrome that can be linked to her job exposure. She does not smoke and alcohol. She also does not have any chronic disease. The woman has been working in drug production as a chemistry technician for 12 years. She has exposed to amoksisilin, potasyum klavunat, siprofloksasin, hidroklorik asid, atropin, efedrin, parasetamol. She has worked with same chemicals when she was pregnant. In newborn's physical examination right part of face, right ear is incomplete in development. In genetic test there wasn't any hereditary pathology.

Use of talidomide, retinoic acid, tamoxifen and cocaine in pregnancy period is suspected. Additively, diabetes mellitus, rubella and influenza infection in pregnancy period can be determined as etiologic factors. New researchs on occupational exposures are needed.

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